

# EXHIBIT C

STATE OF SOUTH CAROLINA     )  
  )  
COUNTY OF RICHLAND         )

AFFIDAVIT

PERSONALLY appeared before me Charmain Reed RN BSN, who, after being duly sworn, certifies and declares as follows:

1. I help manage the Palmetto Health orthopaedic surgery clinic at 1801 Sunset Drive.
2. I have worked at the clinic for 8 of years.
3. During this time I get to work closely with all the orthopaedic residents.
4. This is a resident run clinic where residents see and treat the patients.
5. In my role I had the chance to work with Dr. Afraaz Irani personally starting his intern year.
6. I always found him to be professional and courteous.
7. He got along with all our employees and was well liked by the clinic staff.
8. He had an infectious smile and always treated us and patients with respect, caring and empathy.
9. Dr. Irani was often one of the first to arrive for our staff clinic, and among the last to leave.
10. His hard-working mentality, and team player mindset made it a pleasure to work with him.
11. I remember a particular trauma patient who frequently comes to the clinic after suffering a traumatic amputation of his leg as well extensive injury to his hand.
12. He was seen by Dr. Irani in November of 2011.
13. Dr. Irani treated the patient on November 28, 2011 and ordered an MRI stat and I was unable to schedule the MRI.
14. Eventually he came back and told me he was able to get the appointment by calling radiology and getting the patient seen that day.
15. He subsequently updated the patient on his care plan before discharging him from clinic and sending him over to radiology.
16. In my experience working with several young residents over the years, Dr. Irani exemplified all the best traits of a promising young physician.

I declare under penalty of perjury that the foregoing is true and correct.

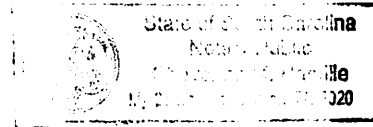
  
Charmain Reed, RN BSN

State of ~~South Carolina~~, County of Richland

Subscribed and sworn to (or affirmed) before me on this 04 day of June, 2014 by  
Charmain Reed, personally known to me or proved to me on the basis of satisfactory  
evidence to be the person who appeared before me



Signature of Notary Public



Notary Public for SOUTH CAROLINA

My commission expires: 07/06/2020

